

Name _____
Withholding Account No. _____
UC Account No. _____
Period Covered _____

010463000

010463000

FORM 941/C1-ME LOOSE

Part Four - Unemployment Contribution Wage Listing

Unless designated a seasonal employer by the Department of Labor, enter all wages in column 15 (Nonseasonal wages). All employees designated seasonal, see instructions for Columns 15 and 16.

14. Social Security Number	15. Nonseasonal Wages Paid in Quarter	16. Seasonal Wages Paid in Quarter	17. Employee Name (Last, First, MI)
a. _____	_____	_____	_____
b. _____	_____	_____	_____
c. _____	_____	_____	_____
d. _____	_____	_____	_____
e. _____	_____	_____	_____
f. _____	_____	_____	_____
g. _____	_____	_____	_____
h. _____	_____	_____	_____
i. _____	_____	_____	_____
j. _____	_____	_____	_____
k. _____	_____	_____	_____
l. _____	_____	_____	_____
m. _____	_____	_____	_____
n. _____	_____	_____	_____
o. _____	_____	_____	_____
p. _____	_____	_____	_____
q. _____	_____	_____	_____
r. _____	_____	_____	_____
s. _____	_____	_____	_____
t. _____	_____	_____	_____
u. _____	_____	_____	_____
v. _____	_____	_____	_____
w. _____	_____	_____	_____

18. Total wages listed on this page 18 _____

19. Total wages for ALL pages. Enter this total on line 6 in Part 2 and only on the last wage listing page 19 _____

